

**DEPARTMENT OF TRANSPORTATION
OFFICE OF EXAMINATION SERVICES
CALTRANS HIGHWAY MECHANIC SUPERVISOR – 6TR67
TRAINING AND EXPERIENCE EVALUATION**

The CALTRANS HIGHWAY MECHANIC SUPERVISOR examination is being given on a departmental promotional basis. This examination will consist solely of this self-assessment Training and Experience Evaluation.

This questionnaire is the only phase of the examination and is designed to elicit a range of specific information regarding each candidate's knowledge, abilities, and experience to effectively perform the duties relative to the classification. Candidates are responsible for reading all of the material provided prior to completing this questionnaire. Responses will be evaluated using predetermined rating criteria. In order to obtain a position on the eligible list, a minimum rating of 70% must be attained. Please answer questions completely since incomplete responses and omitted information cannot be considered and/or assumed. *Resumes, letters of reference, and other materials **will not be evaluated or considered*** as responses to items in the Training and Experience Evaluation.

(NOTE: Failure to meet the entrance requirements and/or to complete this evaluation accurately will result in elimination from this examination.)

*Candidates who fail to follow the instructions and/or **who solicit input or assistance from others to complete this questionnaire** will be eliminated from the examination.*

IT IS IMPORTANT THAT YOU RETAIN A COPY OF THIS TRAINING AND EXPERIENCE EVALUATION FOR YOUR RECORDS. Caltrans will NOT provide you a copy of your Training and Experience Evaluation.

THIS AFFIRMATION MUST BE COMPLETED

I hereby certify and understand that the information provided by me (without assistance from others) on this Training and Experience Evaluation is true and complete to the best of my knowledge and contains no willful misrepresentation or falsifications. I understand this information may be verified. I also understand that if it is discovered that I have made any false representations, I will be removed from the examination process, removed from the list resulting from the examination, may not be allowed to compete in future examinations for State employment, and may be subject to prosecution for misdemeanor or felony offenses under California law. Additionally, State employees may have adverse action taken against them up to and including dismissal.

SIGNATURE: _____ **DATE:** _____

NAME (PRINT): _____

EXAMINATION TITLE: Caltrans Highway Mechanic Supervisor

The completed Training and Experience Evaluation and Standard State Application (STD.678) must be mailed or personally hand delivered to:

**Caltrans
Examination Services (MS 86)
P.O. Box 168036
Sacramento, CA 95816-8036**

**File in person: Caltrans
1727 30th Street, 1st Floor
Sacramento, CA 95816
(916) 227- 7858**

Facsimile (FAX) or electronically mailed (e-mailed) Training and Experience Evaluation **will not** be accepted

Failure to submit your Training and Experience Evaluation will result in elimination from the examination process.



STATE OF CALIFORNIA
DEPARTMENT OF TRANSPORTATION



CONDITIONS OF EMPLOYMENT

Division of Human Resources – Exam and Recruitment Services
PM-EX-0631 (Rev. 01/2015)

EXAMINATION TITLE

CALTRANS HIGHWAY MECHANIC SUPERVISOR

EXAMINATION CODE

6TR67

DATE

CANDIDATE NAME – (PLEASE PRINT – (Last Name, First Name, Middle Initial))

PERSONAL INFORMATION NOTICE: Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Section 1978, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principle purpose of the voluntary information is to facilitate processing of information which you are providing regarding your preference in working conditions. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.17 of the IPA of 1977. Each individual has the right, upon request and proper identification, to inspect all personal information in any record maintained on the individual.

If you are successful in this examination, your name will be placed on an active employment list for the location you select and referred to fill vacancies according to the conditions you specify on this form.

PLEASE CHECK THE BOXES NEXT TO THE DISTRICT(S) WHERE YOU WISH TO WORK.

- | | |
|-----------------------------------------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> DISTRICT 1 – EUREKA | <input type="checkbox"/> DISTRICT 7 – LOS ANGELES |
| <input type="checkbox"/> DISTRICT 2 – REDDING | <input type="checkbox"/> DISTRICT 8 – SAN BERNARDINO |
| <input type="checkbox"/> DISTRICT 3 – MARYSVILLE | <input type="checkbox"/> DISTRICT 9 – BISHOP |
| <input type="checkbox"/> DISTRICT 4 – OAKLAND | <input type="checkbox"/> DISTRICT 10 – STOCKTON |
| <input type="checkbox"/> DISTRICT 5 – SAN LUIS OBISPO | <input type="checkbox"/> DISTRICT 11 – SAN DIEGO |
| <input type="checkbox"/> DISTRICT 6 – FRESNO | <input type="checkbox"/> DISTRICT 12 – IRVINE |
| <input type="checkbox"/> 3400 – SACRAMENTO Note: District 3 does not include Sacramento | |

PLEASE CHECK ONE BOX ONLY NEXT TO THE TYPE OF APPOINTMENT YOU WILL ACCEPT.

- ☐ A11 PERMANENT OR TEMPORARY – FULL TIME, PART TIME, OR INTERMITTENT
- ☐ C55 PERMANENT OR TEMPORARY – FULL TIME ONLY
- ☐ M44 PERMANENT OR TEMPORARY – PART TIME OR INTERMITTENT ONLY
- ☐ D58 PERMANENT ONLY – FULL TIME ONLY
- ☐ K85 TEMPORARY ONLY – FULL TIME ONLY
- ☐ R41 PERMANENT – PART TIME OR INTERMITTENT OR TEMPORARY – FULL TIME, PART TIME, OR INTERMITTENT

Privacy Statement

Please notify the Caltrans promptly of any changes in your address or availability for employment.

CALTRANS HIGHWAY MECHANIC SUPERVISOR

Training and Experience Evaluation

Name: _____

Date: _____

PART I - EMPLOYMENT HISTORY

Instructions: Please describe your work experience as it relates to the **CALTRANS HIGHWAY MECHANIC SUPERVISOR** position. Begin with your most recent position. The *EXPERIENCE CODE* will be used in Part II to identify where you worked. You may include additional pages if necessary.

EXPERIENCE CODE A

Company / State Agency: _____ Job Title: _____

Employer Location: City: _____ State: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____ Telephone Number: _____

EXPERIENCE CODE B

Company / State Agency: _____ Job Title: _____

Employer Location: City: _____ State: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____ Telephone Number: _____

EXPERIENCE CODE C

Company / State Agency: _____ Job Title: _____

Employer Location: City: _____ State: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____ Telephone Number: _____

EXPERIENCE CODE D

Company / State Agency: _____ Job Title: _____

Employer Location: City: _____ State: _____

Dates of Employment: From: _____ To: _____

Supervisor: _____ Telephone Number: _____

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II - WORK EXPERIENCE

INSTRUCTIONS

Step 1: In the *Experience Code* column, use the codes from PART I of this questionnaire to indicate where you performed the activity and/or acquired the task or knowledge. You may list more than one code per item, if applicable.

Step 2: For each item listed on pages 5 - 11, place an "X" in the column(s) that most accurately represents the Level of Experience you have AND the Amount of Time your experience represents.

SAMPLE

AMOUNT OF TIME

| | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|--|--|
| <p>Level of Experience: In the <i>Experience Code</i> column, use the codes from <u>PART I</u> of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.</p> <p>Amount of Time: Place an "X" in the column(s) that most accurately represents the <u>amount of time</u> each level of experience represents. (Leave columns blank that do not apply to you).</p> | | | <p>AMOUNT OF TIME</p> | | | | |
| <p>SECTION 1: Lead Capacity</p> | | | <p>I possess less than one (1) year of experience performing this task at this level of experience.</p> <p>I possess one (1) to two (2) years of experience performing this task at this level of experience.</p> <p>I possess two (2) to three (3) years of experience performing this task at this level of experience.</p> <p>I possess three (3) to four (4) years of experience performing this task at this level of experience.</p> <p>I possess more than four (4) years of experience performing this task at this level of experience.</p> | | | | |
| 1. | <p>Reviewing and approving purchase and service requests from staff for needed supplies, parts, or services.</p> | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | A | <i>I have performed this task on the job under guidance and monitoring</i> | | | x | | |
| | B+C | <i>I have performed this task independently</i> | | x | | | |

PART II-WORK EXPERIENCE (continued)

| | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <p>Level of Experience: In the <i>Experience Code</i> column, use the codes from PART I of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.</p> <p>Amount of Time: Place an "X" in the column(s) that most accurately represents the amount of time each level of experience represents. (Leave columns blank that do not apply to you).</p> <p>SECTION 1: Lead Capacity</p> | | | <p>I possess less than one (1) year of experience performing this task at this level of experience.</p> | <p>I possess one (1) to two (2) years of experience performing this task at this level of experience.</p> | <p>I possess two (2) to three (3) years of experience performing this task at this level of experience.</p> | <p>I possess three (3) to four (4) years of experience performing this task at this level of experience.</p> | <p>I possess more than four (4) years of experience performing this task at this level of experience.</p> |
| <p>1. Reviewing and approving purchase and service requests from staff for needed supplies, parts, or services.</p> | | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>Limited ability (would require training/exposure to perform task)</i> | | | | | |
| | | <i>Average ability (could perform activity with guidance)</i> | | | | | |
| | | <i>Very good ability (could perform activity independently)</i> | | | | | |
| | | <i>Excellent ability (could provide training or guidance to others)</i> | | | | | |
| <p>2. Planning, assigning, and prioritizing work with the resources available to ensure work is done efficiently and timely to meet department needs.</p> | | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>Limited ability (would require training/exposure to perform task)</i> | | | | | |
| | | <i>Average ability (could perform activity with guidance)</i> | | | | | |
| | | <i>Very good ability (could perform activity independently)</i> | | | | | |
| | | <i>Excellent ability (could provide training or guidance to others)</i> | | | | | |
| <p>3. Acting in a lead capacity over shop and/or field mechanics in mechanical repair, preventive maintenance, and other related shop activities.</p> | | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>Limited ability (would require training/exposure to perform task)</i> | | | | | |
| | | <i>Average ability (could perform activity with guidance)</i> | | | | | |
| | | <i>Very good ability (could perform activity independently)</i> | | | | | |
| | | <i>Excellent ability (could provide training or guidance to others)</i> | | | | | |

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II-WORK EXPERIENCE (continued)

| Level of Experience: In the <i>Experience Code</i> column, use the codes from PART I of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable. Amount of Time: Place an "X" in the column(s) that most accurately represents the <u>amount of time</u> each level of experience represents. (Leave columns blank that do not apply to you). | | | AMOUNT OF TIME | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| SECTION 1: Lead Capacity (continued) | | | I possess less than one (1) year of experience performing this task at this level of experience. | I possess one (1) to two (2) years of experience performing this task at this level of experience. | I possess two (2) to three (3) years of experience performing this task at this level of experience. | I possess three (3) to four (4) years of experience performing this task at this level of experience. | I possess more than four (4) years of experience performing this task at this level of experience. |
| 4. | Directing crane and personnel hoist inspections to ensure compliance with local, State, and Federal requirements. | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>Limited ability (would require training/exposure to perform task)</i> | | | | | |
| | | <i>Average ability (could perform activity with guidance)</i> | | | | | |
| | | <i>Very good ability (could perform activity independently)</i> | | | | | |
| | | <i>Excellent ability (could provide training or guidance to others)</i> | | | | | |
| 5. | Conducting tailgate safety meetings to educate staff on current safety policies and procedures utilizing the Caltrans Safety Manual and Code of Safe Practices. | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II-WORK EXPERIENCE (continued)

| | | | AMOUNT OF TIME | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <p>Level of Experience: In the <i>Experience Code</i> column, use the codes from PART I of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.</p> <p>Amount of Time: Place an "X" in the column(s) that most accurately represents the <u>amount of time</u> each level of experience represents. (Leave columns blank that do not apply to you).</p> | | | I possess less than one (1) year of experience performing this task at this level of experience. | I possess one (1) to two (2) years of experience performing this task at this level of experience. | I possess two (2) to three (3) years of experience performing this task at this level of experience. | I possess three (3) to four (4) years of experience performing this task at this level of experience. | I possess more than four (4) years of experience performing this task at this level of experience. |
| SECTION 2: Technical Ability | | | | | | | |
| 6. | Repairing and operating gas- and diesel-powered and alternative-fuel automobiles, trucks, pumps, motors etc., used in the construction and maintenance of highways. | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |
| 7. | Applying laws and regulations pertaining to the construction, operation, and repair of highway construction and maintenance equipment, such as emissions programs, crane and personnel hoist inspections, and Biennial Inspection of Terminals (BIT). | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |
| 8. | Utilizing computer and electronic data collection systems and programs used in the maintenance and repair of equipment, including the Fleet Management System (FMS). | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II-WORK EXPERIENCE (continued)

| Level of Experience: In the <i>Experience Code</i> column, use the codes from PART I of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable. Amount of Time: Place an "X" in the column(s) that most accurately represents the <u>amount of time</u> each level of experience represents. (Leave columns blank that do not apply to you). | | | AMOUNT OF TIME | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| | | | I possess less than one (1) year of experience performing this task at this level of experience. | I possess one (1) to two (2) years of experience performing this task at this level of experience. | I possess two (2) to three (3) years of experience performing this task at this level of experience. | I possess three (3) to four (4) years of experience performing this task at this level of experience. | I possess more than four (4) years of experience performing this task at this level of experience. |
| SECTION 2: Technical Ability (continued) | | | | | | | |
| 9. | Maintaining records in order to track equipment inspections, maintenance, repairs, and discipline issues utilizing the Permanent Equipment Maintenance Records (PEMR) log, spreadsheets, Fleet Management System (FMS). | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |
| 10. | Coordinating shop and facility safety inspections, repairs, and upkeep to ensure compliance with current regulations. | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |
| 11. | Scheduling preventive maintenance inspections of equipment, utilizing the Fleet Management System (FMS). | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II-WORK EXPERIENCE (continued)

AMOUNT OF TIME

Level of Experience: In the *Experience Code* column, use the codes from **PART I** of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.

Amount of Time: Place an "X" in the column(s) that most accurately represents the amount of time each level of experience represents. (Leave columns blank that do not apply to you).

SECTION 2: Technical Ability (continued)

12. Ensuring equipment and vehicles are in compliance with the Biennial Inspection Terminals (BIT) Program, the Bureau of Automotive Repair's (BAR) Smog Programs, California Air Resources Board air- quality mandates, and local- State-, and Federally-mandated programs.

| Experience Code (Part I) | Level of Experience |
|--------------------------|----------------------------------------------------------------------------|
| | <i>I have had no training or experience with this task</i> |
| | <i>I have had training on this task, but no application on the job</i> |
| | <i>I have performed this task on the job under guidance and monitoring</i> |
| | <i>I have performed this task independently</i> |

13. Maintaining shop security by implementing appropriate opening and closing procedures for daily business utilizing keys, key cards, and security/alarm systems.

| Experience Code (Part I) | Level of Experience |
|--------------------------|----------------------------------------------------------------------------|
| | <i>I have had no training or experience with this task</i> |
| | <i>I have had training on this task, but no application on the job</i> |
| | <i>I have performed this task on the job under guidance and monitoring</i> |
| | <i>I have performed this task independently</i> |

14. Reading, interpreting, and analyzing plans, manuals, drawings, sketches, and specifications.

| Experience Code (Part I) | Level of Experience |
|--------------------------|----------------------------------------------------------------------------|
| | <i>I have had no training or experience with this task</i> |
| | <i>I have had training on this task, but no application on the job</i> |
| | <i>I have performed this task on the job under guidance and monitoring</i> |
| | <i>I have performed this task independently</i> |

| I possess less than one (1) year of experience performing this task at this level of experience. | I possess one (1) to two (2) years of experience performing this task at this level of experience. | I possess two (2) to three (3) years of experience performing this task at this level of experience. | I possess three (3) to four (4) years of experience performing this task at this level of experience. | I possess more than four (4) years of experience performing this task at this level of experience. |
|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

CALTRANS HIGHWAY MECHANIC SUPERVISOR Training and Experience Evaluation

PART II-WORK EXPERIENCE (continued)

| <p>Level of Experience: In the <i>Experience Code</i> column, use the codes from <u>PART I</u> of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.</p> <p>Amount of Time: Place an "X" in the column(s) that most accurately represents the <u>amount of time</u> each level of experience represents. (Leave columns blank that do not apply to you).</p> <p>SECTION 2: Technical Ability (continued)</p> | | | AMOUNT OF TIME | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| | | | I possess less than one (1) year of experience performing this task at this level of experience. | I possess one (1) to two (2) years of experience performing this task at this level of experience. | I possess two (2) to three (3) years of experience performing this task at this level of experience. | I possess three (3) to four (4) years of experience performing this task at this level of experience. | I possess more than four (4) years of experience performing this task at this level of experience. |
| 15. | Accessing, retrieving, and interpreting data contained in the Fleet Management System (FMS). | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |
| 16. | Monitoring hazardous waste storage areas and appropriate time intervals for handling and disposal of waste. | | | | | | |
| | Experience Code (Part I) | Level of Experience | | | | | |
| | | <i>I have had no training or experience with this task</i> | | | | | |
| | | <i>I have had training on this task, but no application on the job</i> | | | | | |
| | | <i>I have performed this task on the job under guidance and monitoring</i> | | | | | |
| | | <i>I have performed this task independently</i> | | | | | |